



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

OCT 13 2010

HEALTH AFFAIRS

The Honorable Wally Herger
U.S. House of Representatives
Washington, DC 20515

Dear Representative Herger:

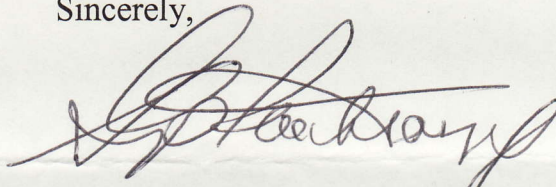
This letter is a follow-up to the Under Secretary of Defense for Personnel and Readiness response to your letter of February 17, 2010, expressing concerns on the frequency of use of the Military Acute Concussion Evaluation (MACE) and request for a recurring publically accessible report. Our initial response indicated we were finalizing Department guidance on the protocols for the early detection of Service members who may have sustained mild to moderate traumatic brain injuries, also known as a concussion.

The Deputy Secretary of Defense signed Directive-Type Memorandum (DTM), "Policy Guidance for Management of Concussion/Mild Traumatic Brain Injury in the Deployed Setting," on June 21, 2010. This DTM requires medical screening and specific procedures to ensure documentation and tracking of Service members after possible concussive events. Additionally, instead of reporting the MACE score merely as a single number, the scores for each section—Cognitive, Neurological, and Symptoms—are reported separately. This documentation and tracking will enable the Department to maintain a record of a Service member's injury and the follow-on actions. The medical algorithms within the policy incorporate the use of the MACE and provide coding guidance to guarantee accurate documentation of diagnoses. There also are three versions of MACE currently in use in theater. The use of different versions reduces the possibility that the Service member will memorize the evaluation and reduce the incidence of false negative screening results.

The Department of Defense currently has access to records of MACE results that were entered into the electronic medical records system, but due to a lack of information technology (IT) infrastructure in remote areas and combat zones, not all results are entered into the system. The Department is pursuing enterprise-wide solutions to develop a widespread, coordinated IT infrastructure in remote areas and in austere combat zones

that allow for capture of Service member medical data at point of injury. Until that time, a public reporting of the frequency that the MACE is applied would be incomplete, and thus, not reflective of the true numbers. We hope this addresses your concerns, and again, thank you for your continued support of our Service members.

Sincerely,

A handwritten signature in dark ink, appearing to read "G. Peach Taylor, Jr.", with a stylized, cursive script.

George Peach Taylor, Jr., M.D.
Deputy Assistant Secretary of Defense
(Force Health Protection and Readiness)
Performing the Duties of the
Assistant Secretary of Defense
(Health Affairs)